

Prescription-only Tobacco is the Sensible Solution.

By David Small.

First published in *New Zealand Herald*, 31 May 2001.

I saw a well-dressed man in his 60s buying cigarettes at a petrol station recently, apparently as embarrassed as he might have been twenty years ago asking for condoms at a chemist shop. The following day, I saw two boys about 13 years old swaggering proudly along the street as they shared a cigarette. It occurred to me that it is time for a radical reappraisal of how we deal with tobacco use in this country.

Alcohol and tobacco are often linked as the two legal and, therefore, socially acceptable drugs. However, unlike alcohol, which most people can use quite often without becoming alcoholics, tobacco holds a tight grip on most smokers. Very few are able to be casual users. People who start using tobacco commonly become addicted, often after only a very short time, are then unable to stop without a long and difficult withdrawal period and remain for years afterwards just one cigarette away from being a user again.

There is widespread acceptance that it is not good for young people to start smoking. And the overwhelming response to the government quit lines and subsidies for the expensive stop-smoking patches demonstrates how many adult users of tobacco would like to quit.

Besides these programmes, people are discouraged from smoking by the high price of tobacco and by printing health warnings on packets. This may help a little, but surely by now every smoker knows that tobacco is bad for them. And putting the price up, while providing some incentive to stop and helping to pay for the health bill, essentially just impoverishes tobacco addicts. Further restrictions on smoking in public places, as parliament is currently considering, still fails to treat the problem at source.

The real answer must lie in preventing people from taking up the habit. This was the thinking behind policies like banning tobacco advertising and putting resources into Smoke-Free sponsorship of various sporting

and cultural events. Like price hikes and packet warnings, this is probably making some difference.

But none of this is enough to rid society of the scourge of tobacco that causes so much ill-health to so many people and places such a large strain on the country's health services. The time is right for us to grasp the nettle and deal with this problem in a radical new way.

I believe that like other drug addicts, tobacco users must be acknowledged as being sick people and treated accordingly. And like other dangerous drugs, tobacco should be controlled and available on prescription only. People with tobacco addictions would be required to register through a medical professional and be prescribed appropriate amounts of tobacco for their personal use. They could even specify which brand and delivery mechanism they prefer; Port Royal pipe tobacco, Winfield blue cigarettes or whatever. They could obtain their tobacco by bringing their purchase authorisation (perhaps something like the photo drivers' licence) to a chemist or some other registered outlet and obtain a week's supply at a time.

The tobacco could be sold at a price considerably lower than that currently charged. The price would not need to be such a deterrent but would need to be high enough to cover the costs of administering the programme and subsidising the country's health budget. With all smokers registered, it would also be much easier to implement quit-smoking schemes. This could be done directly to the people concerned without having to make use of expensive publicity programmes which have the unfortunate side-effect of bringing the very existence of tobacco to the attention of people who might not otherwise be aware of it.

An official register would also enable the tobacco companies to achieve all that they want by way of advertising. They maintain that their marketing is neither designed to encourage new people to take up smoking nor to encourage existing users to smoke more; it just tries to entice existing smokers to change brands. They could be allowed, at a price, to promote the relative merits of one brand or another directly to known addicts and this should satisfy all of their marketing aims.

Tobacco would be banned from public sale. It would not be available through vending machines, at petrol stations, dairies or pubs. And there could be hefty fines for anyone illegally dealing in the substance. None of the pitfalls of past attempts at prohibition of alcohol would resurface because users would not be denied access to tobacco. There would be no

profit in illegal dealing in the substance because users would have legitimate access to the amounts they needed at a reasonable price. And anyone who has tried homegrown tobacco would know that there would be no concern about backyard crops. Furthermore, retailers who currently feel a commercial obligation to hold very expensive stocks of tobacco would no longer have the same security risks.

Unlike almost all other recreational drugs, tobacco offers very little to people other than stopping addicts experience withdrawal symptoms. First-time users experience no euphoria and no pleasurable changes to their mood, mind or senses. It is not really the kind of substance that non-addicts would go out of their way to get hold of. The trouble is that its current over-the-counter availability means that anyone can just buy it and try it.

The real value of this proposal is that it would radically reduce the possibilities of young people encountering tobacco and being tempted to start using it. Of course, some would still try it and new addicts would be continually added to the register. But a scheme like this could have tobacco virtually eliminated within a generation or two.

*Dr David Small, Senior Lecturer in Education
University of Canterbury, Private Bag 4800, Christchurch
Ph: (64-3) 364-2268, Fax (64-3) 364-2418
david.small@canterbury.ac.nz*